

| United States Bankruptcy Court Northern District of Illinois | | Voluntary Petition | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------------------------|--|--|--------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|----------|-----------|-------------|-------------|-----------------|------------------|-------------------|-------------------|--------------------|-----------------|--|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------|--------------------------|---------------------------|-----------------------------|--------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------|--------------------------|---------------------------|-----------------------------|--------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------|--------------------------|
| Name of Debtor (if individual, enter Last, First, Middle): Stringer, Jesse B | | Name of Joint Debtor (Spouse) (Last, First, Middle): Stringer, Yvette C | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-4387 | | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-6139 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Street Address of Debtor (No. and Street, City, and State): 324 W 101st Place Chicago, IL | | Street Address of Joint Debtor (No. and Street, City, and State): 324 W 101st Place Chicago, IL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ZIP Code 60628 | | ZIP Code 60628 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| County of Residence or of the Principal Place of Business: Cook | | County of Residence or of the Principal Place of Business: Cook | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address of Debtor (if different from street address): | | Mailing Address of Joint Debtor (if different from street address): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ZIP Code | | ZIP Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Location of Principal Assets of Business Debtor (if different from street address above): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) | | Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other | Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | | Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <input type="checkbox"/> Debts are primarily business debts. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). | Chapter 11 Debtors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Statistical/Administrative Information <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. </div> <div style="width: 30%;"> THIS SPACE IS FOR COURT USE ONLY </div> </div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; width: 10%;"><input type="checkbox"/></td> <td style="text-align: center; width: 10%;"><input checked="" type="checkbox"/></td> <td style="text-align: center; width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">1- 49</td> <td style="text-align: center;">50- 99</td> <td style="text-align: center;">100- 199</td> <td style="text-align: center;">200- 999</td> <td style="text-align: center;">1,000- 5,000</td> <td style="text-align: center;">5,001- 10,000</td> <td style="text-align: center;">10,001- 25,000</td> <td style="text-align: center;">25,001- 50,000</td> <td style="text-align: center;">50,001- 100,000</td> <td style="text-align: center;">OVER 100,000</td> </tr> </table> | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1- 49 | 50- 99 | 100- 199 | 200- 999 | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | Estimated Assets <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">\$0 to \$50,000</td> <td style="text-align: center;">\$50,001 to \$100,000</td> <td style="text-align: center;">\$100,001 to \$500,000</td> <td style="text-align: center;">\$500,001 to \$1 million</td> <td style="text-align: center;">\$1,000,001 to \$10 million</td> <td style="text-align: center;">\$10,000,001 to \$50 million</td> <td style="text-align: center;">\$50,000,001 to \$100 million</td> <td style="text-align: center;">\$100,000,001 to \$500 million</td> <td style="text-align: center;">\$500,000,001 to \$1 billion</td> <td style="text-align: center;">More than \$1 billion</td> </tr> </table> Estimated Liabilities <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; width: 10%;"><input type="checkbox"/></td> <td style="text-align: center; width: 10%;"><input type="checkbox"/></td> <td style="text-align: center; width: 10%;"><input checked="" type="checkbox"/></td> <td style="text-align: center; width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">\$0 to \$50,000</td> <td style="text-align: center;">\$50,001 to \$100,000</td> <td style="text-align: center;">\$100,001 to \$500,000</td> <td style="text-align: center;">\$500,001 to \$1 million</td> <td style="text-align: center;">\$1,000,001 to \$10 million</td> <td style="text-align: center;">\$10,000,001 to \$50 million</td> <td style="text-align: center;">\$50,000,001 to \$100 million</td> <td style="text-align: center;">\$100,000,001 to \$500 million</td> <td style="text-align: center;">\$500,000,001 to \$1 billion</td> <td style="text-align: center;">More than \$1 billion</td> </tr> </table> | | <input type="checkbox"/> | \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1- 49 | 50- 99 | 100- 199 | 200- 999 | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|---|---------------------------------|--|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | | Name of Debtor(s): Stringer, Jesse B Stringer, Yvette C |
| All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) | | |
| Location Where Filed: Northern District of Illinois | Case Number: 14-08494 | Date Filed: 3/10/14 |
| Location Where Filed: | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) | | |
| Name of Debtor: - None - | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A | | Exhibit B |
| (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) | | (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). |
| <input type="checkbox"/> Exhibit A is attached and made a part of this petition. | | X /s/ Peter L. Berk Signature of Attorney for Debtor(s) (Date) Peter L. Berk |
| Exhibit C | | |
| Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? | | |
| <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No. | | |
| Exhibit D | | |
| (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) | | |
| <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. | | |
| If this is a joint petition: | | |
| <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. | | |
| Information Regarding the Debtor - Venue | | |
| (Check any applicable box) | | |
| <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | |
| Certification by a Debtor Who Resides as a Tenant of Residential Property | | |
| (Check all applicable boxes) | | |
| <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) | | |
| <hr/> (Name of landlord that obtained judgment) | | |
| <hr/> (Address of landlord) | | |
| <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)). | | |

B1 (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Stringer, Jesse B**Stringer, Yvette C****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Jesse B StringerSignature of Debtor **Jesse B Stringer****X /s/ Yvette C Stringer**Signature of Joint Debtor **Yvette C Stringer**

Telephone Number (If not represented by attorney)

April 27, 2015

Date

Signature of Attorney***X /s/ Peter L. Berk**

Signature of Attorney for Debtor(s)

Peter L. Berk 6274567

Printed Name of Attorney for Debtor(s)

Law Office of Peter Berk

Firm Name

**900 N Franklin Street
Suite 505
Chicago, IL 60610**

Address

Email: plberk@berklegal.com**(312) 758-1121 Fax: (312) 212-5963**

Telephone Number

April 27, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Jesse B Stringer
Yvette C Stringer**

Debtor(s)

Case No.
Chapter **7**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Jesse B Stringer
Jesse B Stringer

Date: April 27, 2015

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Jesse B Stringer
Yvette C Stringer**

Debtor(s)

Case No.
Chapter **7**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Yvette C Stringer
Yvette C Stringer

Date: April 27, 2015

United States Bankruptcy Court
Northern District of Illinois

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

Chapter _____

7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|-------------------|------------------|-------------------|-----------------|
| A - Real Property | Yes | 1 | 85,188.00 | | |
| B - Personal Property | Yes | 3 | 7,523.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 69,412.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 15,569.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 14 | | 96,796.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 4,883.17 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 4,379.16 |
| Total Number of Sheets of ALL Schedules | | 28 | | | |
| | Total Assets | | 92,711.00 | | |
| | | Total Liabilities | | 181,777.00 | |

United States Bankruptcy Court
Northern District of Illinois

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 15,569.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 15,569.00 |

State the following:

| | |
|---|-----------------|
| Average Income (from Schedule I, Line 12) | 4,883.17 |
| Average Expenses (from Schedule J, Line 22) | 4,379.16 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 3,837.02 |

State the following:

| | | |
|--|------------------|------------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 1,767.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 15,569.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 96,796.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 98,563.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--|---|---|
| 1. Cash on hand | X | | | |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Savings account - First Midwest Bank | J | 300.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | Miscellaneous Household Goods and Furnishings | J | 1,000.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | Books Pictures, Videos, and DVD's | J | 400.00 |
| | | Whole Life Insurance Policy - Colonial Penn - No Cash Value | H | 0.00 |
| 6. Wearing apparel. | | Clothing | J | 600.00 |
| 7. Furs and jewelry. | | Assorted Jewelry | W | 150.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | 2 Term Life Insurance Policies Purchased Through Employer Roseland Community Hospital | J | 0.00 |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| | | | | Sub-Total > |
| | | | | 2,450.00 |
| | | | | (Total of this page) |

2 continuation sheets attached to the Schedule of Personal Property

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | Pension - Auto Mechanics Local 701 Roseland Community Hospital Retirement Plan | H W | Unknown Unknown |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | X | | | |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |

Sub-Total >
(Total of this page)

0.00

Sheet 1 of 2 continuation sheets attached
to the Schedule of Personal Property

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 2005 Chevrolet Avalanche, Fair Condition; Vehicle has been in accident; has damage to Electrical; Check Engine Light On; Mileage: 166,942; value per Edmunds.Com 4/27/2015 | H | 5,073.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > **5,073.00**
(Total of this page)
Total > **7,523.00**

(Report also on Summary of Schedules)

Sheet 2 of 2 continuation sheets attached
to the Schedule of Personal Property

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)
 11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|--|--|----------------------------|---|
| Real Property | | | |
| 324 W 101st Place, Chicago, IL 60628 (single family home); value is per Zillow.Com 4/24/15 | 735 ILCS 5/12-901 | 30,000.00 | 85,188.00 |
| Checking, Savings, or Other Financial Accounts, Certificates of Deposit | | | |
| Savings account - First Midwest Bank | 735 ILCS 5/12-1001(b) | 300.00 | 300.00 |
| Household Goods and Furnishings | | | |
| Miscellaneous Household Goods and Furnishings | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 |
| Books, Pictures and Other Art Objects; Collectibles | | | |
| Books Pictures, Videos, and DVD's | 735 ILCS 5/12-1001(b) | 400.00 | 400.00 |
| Wearing Apparel | | | |
| Clothing | 735 ILCS 5/12-1001(a) | 600.00 | 600.00 |
| Furs and Jewelry | | | |
| Assorted Jewelry | 735 ILCS 5/12-1001(b) | 150.00 | 150.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans | | | |
| Pension - Auto Mechanics Local 701 | 735 ILCS 5/12-1006 | 100% | Unknown |
| Roseland Community Hospital Retirement Plan | 735 ILCS 5/12-1006 | 100% | Unknown |
| Automobiles, Trucks, Trailers, and Other Vehicles | | | |
| 2005 Chevrolet Avalanche, Fair Condition; Vehicle has been in accident; has damage to Electrical; Check Engine Light On; Mileage: 166,942; value per Edmunds.Com 4/27/2015 | 735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b) | 2,400.00 4,000.00 | 5,073.00 |
| Total: | | | 38,850.00 |
| 0 continuation sheets attached to Schedule of Property Claimed as Exempt | | | 92,711.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|------------------------------------|--|------------|--------------|----------|--|---------------------------------|
| | | | | | | | | |
| Account No. xxxxxxxxx2701 | | | Opened 11/01/99 Last Active 2/19/14 | | | | | |
| Chase Mtg Po Box 24696 Columbus, OH 43224 | J | | Mortgage 324 W 101st Place, Chicago, IL 60628 (single family home); value is per Zillow.Com 4/24/15 | | | | | |
| | | | Value \$ 85,188.00 | | | | 62,572.00 | 0.00 |
| Account No. | | | 4/18/2014 Judicial Replacement Lien 2005 Chevrolet Avalanche, Fair Condition; Vehicle has been in accident; has damage to Electrical; Check Engine Light On; Mileage: 166,942; value per Edmunds.Com 4/27/2015 | | | | | |
| Prestige Financial PO Box 26707 Salt Lake City, UT 84126 | J | | Value \$ 5,073.00 | | | | 6,840.00 | 1,767.00 |
| Account No. | | | Value \$ | | | | | |
| Account No. | | | Value \$ | | | | | |
| 0 continuation sheets attached | | | Subtotal (Total of this page) | | | | 69,412.00 | 1,767.00 |
| | | | Total (Report on Summary of Schedules) | | | | 69,412.00 | 1,767.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | TYPE OF PRIORITY | | | | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY | AMOUNT ENTITLED TO PRIORITY |
|---|------------------------------|--|---|--------------|----------|------|---|-----------------------------------|
| | | | CONTINGENT | UNLIQUIDATED | DISPUTED | DATE | | |
| Account No. | | past-due income tax | | | | | | 0.00 |
| Internal Revenue Service Bankruptcy Notice Address PO Box 7346 Philadelphia, PA 19101-7346 | J | | | | | | 15,569.00 | 15,569.00 |
| Account No. | | | | | | | | |
| Account No. | | | | | | | | |
| Account No. | | | | | | | | |
| Account No. | | | | | | | | |
| Account No. | | | | | | | | |
| Sheet <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims | | | Subtotal (Total of this page) | | | | 0.00 | 0.00 |
| | | | | | | | 15,569.00 | 15,569.00 |
| | | | Total (Report on Summary of Schedules) | | | | 0.00 | 0.00 |
| | | | | | | | 15,569.00 | 15,569.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B R U T O R | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | AMOUNT OF CLAIM |
|---|--|------------------------------------|---|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. | | | unsecured | | | |
| AAM Inc. 330 Georgetown Sq. Wood Dale, IL 60191 | J | | | | | 1,250.00 |
| Account No. | | | medical | | | |
| Advocate Medical Group 701 Lee Street Des Plaines, IL 60016 | J | | | | | 474.00 |
| Account No. | | | medical | | | |
| Advocate Trinity Hospital 2320 E 93rd Street Chicago, IL 60617 | J | | | | | 2,556.00 |
| Account No. | | | collection | | | |
| AIS Services LLC 50 California St. Suite 1500 San Francisco, CA 94111 | J | | | | | 271.00 |
| 13 continuation sheets attached | | | Subtotal (Total of this page) | | | 4,551.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------------|---|----------------------------------|--------------|----------|-----------------|
| | | | C | U | D | |
| Account No. xxxxx7904 | | Opened 8/12/08 Last Active 12/31/08 Unsecured | | | | |
| America's Financial Choice 1415 W 22nd St. Oak Brook, IL 60523 | W | | | | | 696.00 |
| Account No. | | collection - T Mobile | | | | |
| American Infosource PO Box 248848 Oklahoma City, OK 73124 | J | | | | | 701.00 |
| Account No. | | collection - Direct Tv | | | | |
| American Infosource Mailstation N387 2230 E Imperial HWY El Segundo, CA 90245 | J | | | | | 475.00 |
| Account No. | | payday loan | | | | |
| Americash Loans 1513 E 53rd St Chicago, IL 60615 | J | | | | | 2,443.00 |
| Account No. xxxx1012 | | 11 Us Cellular M06 | | | | |
| AMO Recoveries 6737 W Washington St S-3 West Allis, WI 53214 | W | | | | | 190.00 |
| Sheet no. 1 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 4,505.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B E T O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CO N T I N G E N T | UN L I Q U I D A T E D | DIS P U T E D | AMOUNT OF CLAIM |
|--|---|---|--|--|------------------------------|-----------------|
| | | | | | | |
| Account No. | | | | | | |
| Approved Credit Solutions 704 S State Road 135 Ste D328 Greenwood, IN 46143 | J | medical collection - Consultants in Gastroenterology | | | | 173.00 |
| Account No. | | | | | | |
| Armor Systems Corp. 1700 Ziefer Dr. Suite 1 Zion, IL 60099 | J | collection acct | | | | 190.00 |
| Account No. xxxx6274 | | | | | | |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | 04 Illinois Tollway Authority | | | | 4,531.00 |
| Account No. xxxx7789 | | | | | | |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | 04 Illinois Tollway Authority | | | | 1,772.00 |
| Account No. xxxx1760 | | | | | | |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | 04 Illinois Tollway Authority | | | | 1,069.00 |
| Sheet no. <u>2</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 7,735.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------------|---|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxx8788 | | 04 Illinois Tollway Authority | | | | 997.00 |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | | | | | |
| Account No. xxxx2532 | | 04 Illinois Tollway Authority | | | | 637.00 |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | | | | | |
| Account No. xxxx4648 | | 04 Illinois Tollway Authority | | | | 567.00 |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | | | | | |
| Account No. xxxx6322 | | 04 Illinois Tollway Authority | | | | 283.00 |
| Arnoldharris 111 West Jackson B Chicago, IL 60604 | H | | | | | |
| Account No. | | medical | | | | 11.00 |
| Associated St. James Radiologists PO Box 3463 Springfield, IL 62708 | J | | | | | |
| Sheet no. <u>3</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 2,495.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B E T O R H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CO N T I N G E N T | UN L I Q U I D A T E D | DIS P U T E D | AMOUNT OF CLAIM |
|--|---|---|--|--|------------------------------|-----------------|
| | | | | | | |
| Account No. | | phone service | | | | |
| AT&T Mobility ONE AT&T WAY, SUITE 3A104 Bedminster, NJ 07921 | J | | | | | 677.00 |
| Account No. | | security svcs | | | | |
| Brinks Home Security PO Box 70834 Charlotte, NC 28272 | J | | | | | 88.00 |
| Account No. | | medical | | | | |
| Bud's Ambulance Svcs 1234 E Sibley Blvd. Dolton, IL 60419 | J | | | | | 156.00 |
| Account No. xxxxxxxxxxxxx3970 | | Opened 8/01/14 Last Active 1/30/15 Credit Card | | | | |
| Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | J | | | | | 2,407.00 |
| Account No. | | collection acct | | | | |
| Cerastes, LLC C/O Weinstein Pinson Riley 2001 Western Ave. Suite 400 Seattle, WA 98121 | J | | | | | 702.00 |
| Sheet no. <u>4</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 4,030.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B E T O R H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CO N T I N G E N T | U N L I Q U I D A T E D | DIS P U T E D | AMOUNT OF CLAIM |
|--|---|---|--|--|------------------------------|-----------------|
| | | | | | | |
| Account No. | | medical | | | | |
| Chandra Diagnostic Cardiology 4250 N Marine Dr. # 236 Chicago, IL 60613 | J | | | | | 41.00 |
| Account No. | | overdraft | | | | |
| Chase Bank 800 Brookedge Blvd. Westerville, OH 43081 | J | | | | | 574.00 |
| Account No. | | medical | | | | |
| Chicago Imaging PO Box 3183 Carol Stream, IL 60132 | J | | | | | 30.00 |
| Account No. xxxxxxxxxxxx0643 | | Opened 7/01/14 Last Active 8/31/14 Credit Card | | | | |
| Credit One Bank Po Box 98873 Las Vegas, NV 89193 | J | | | | | 596.00 |
| Account No. | | credit card | | | | |
| Credit One Bank PO Box 98873 Las Vegas, NV 89193 | J | | | | | 596.00 |
| Sheet no. <u>5</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 1,837.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|------------|--------------|----------|------------------|
| | | | | | | |
| Account No. | | medical | | | | |
| Dr. Vipul Patel 2075 Indianapolis Blvd. Whiting, IN 46394 | J | | | | | 75.00 |
| Account No. | | medical | | | | |
| Emergency Care Physician Servs PO Box 88640 Chicago, IL 60680 | J | | | | | 404.00 |
| Account No. | | collection - Sprint | | | | |
| Enhanced Recovery Corporation 8014 Bayberry Road Jacksonville, FL 32256-7412 | J | | | | | 1,084.00 |
| Account No. | | collection acct | | | | |
| Galaxy Intl Purchasing LLC Attn Quantum 3 Group LLC PO Box 788 Kirkland, WA 98083 | J | | | | | 660.00 |
| Account No. | | deficiency balance on auto loan | | | | |
| Gateway Financial Solutions PO Box 3257 Saginaw, MI 48605 | J | | | | | 8,995.00 |
| Sheet no. <u>6</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | <u>11,218.00</u> |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. | | attorney's fees | | | | |
| Gleason & Gleason LLC 77 W Washington Suite 1218 Chicago, IL 60602 | J | | | | | Unknown |
| Account No. | | collection | | | | |
| Global Payments, Inc. PO Box 661158 Chicago, IL 60666 | J | | | | | 100.00 |
| Account No. xxxxxxxx1001 | | Opened 1/01/15 Collection Attorney At T Uverse | | | | |
| IC System Attn: Bankruptcy 444 Highway 96 East; Po Box 64378 St. Paul, MN 55164 | W | | | | | 304.00 |
| Account No. | | overpayment | | | | |
| IL Dept Employment Security Benefit Payment Control Division PO Box 4385 Chicago, IL 60680 | J | | | | | 2,318.00 |
| Account No. | | phone service | | | | |
| Illinois Bell Telephone Co. C/o AT&T Services, Inc. One AT&T Way, Room 3A104 Bedminster, NJ 07921 | J | | | | | 409.00 |
| Sheet no. <u>7</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>3,131.00</u> |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. | | medical | | | | |
| Illinois Eye Institute 3241 South Michigan Ave. Chicago, IL 60616 | J | | | | | 262.00 |
| Account No. | | payday loan | | | | |
| Integrity Advance, LLC 300 Creek View Road Suite 102 Newark, DE 19711 | J | | | | | 400.00 |
| Account No. | | 12/31/2009 past-due income tax | | | | |
| Internal Revenue Service Bankruptcy Notice Address PO Box 7346 Philadelphia, PA 19101-7346 | J | | | | | 4,590.00 |
| Account No. | | collection acct | | | | |
| Leading Edge Recovery Solutions 5440 N Cumberland Ave Suite 300 Chicago, IL 60656 | J | | | | | 710.00 |
| Account No. | | collection acct | | | | |
| Medical Business Bureau 111 W Jackson Suite 400 Chicago, IL 60604 | J | | | | | 113.00 |
| Sheet no. <u>8</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>6,075.00</u> |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------------|---|----------------------------------|--------------|----------|------------------|
| | | | C | U | D | |
| Account No. | | collection - Burke Medical | | | | |
| Merchants Credit Guide 223 W Jackson Blvd. Suite 900 Chicago, IL 60606-6908 | J | | | | | 98.00 |
| Account No. | | medical | | | | |
| Metrosouth Medical Center 12935 S Gregory Street Blue Island, IL 60406 | J | | | | | 11,126.00 |
| Account No. | | medical | | | | |
| Midwest Diagnostic Pathology 75 Remittance Drive Ste 3070 Chicago, IL 60675-3070 | J | | | | | 72.00 |
| Account No. | | medical | | | | |
| Midwest Emergency Assoc. PO Box 5990 Carol Stream, IL 60197 | J | | | | | 864.00 |
| Account No. xxx8784 | | collection acct | | | | |
| Municipal Collection Services PO Box 666 Lansing, IL 60438 | H | | | | | 250.00 |
| Sheet no. <u>9</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>12,410.00</u> |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------------|---|----------------------------------|--------------|----------|------------------|
| | | | | | | |
| Account No. xxx6075 | | collection Village Of Orland Park | | | | |
| Municipal Collection Svcs 3348 Ridge Road Lansing, IL 60438 | H | | | | | 250.00 |
| Account No. | | collection - Americredit | | | | |
| NCO Financial Attn: Bankruptcy Lake Huntington, NY 12752 | J | | | | | 12,752.00 |
| Account No. | | collection acct | | | | |
| Ndc Ck Svc Po Box 661158 Chicago, IL 60666 | J | | | | | 100.00 |
| Account No. | | collection | | | | |
| North Shore Agency 270 Spagnoli Road Melville, NY 11747 | J | | | | | 27.00 |
| Account No. | | collection | | | | |
| Partners Financial Svcs PO Box 728 Fenton, MO 63026 | J | | | | | 1,552.00 |
| Sheet no. 10 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 14,681.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------------|---|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. | | credit card | | | | |
| Premier Bankcard/Charter PO Box 2208 Vacaville, CA 95696 | J | | | | | 403.00 |
| Account No. | | collection | | | | |
| Resurgent Capital Services PO Box 10587 Greenville, SC 29603 | J | | | | | 2,744.00 |
| Account No. | | collection account, MCI Communications | | | | |
| Resurgent Capital Services PO Box 10587 Greenville, SC 29603 | J | | | | | 249.00 |
| Account No. | | medical | | | | |
| Roseland Community Hospital 45 W. 111th Street Chicago, IL 60628 | J | | | | | 395.00 |
| Account No. | | auto loan deficiency | | | | |
| Santander Consumer USA PO Box 961245 Fort Worth, TX 76161 | J | | | | | 16,951.00 |
| Sheet no. <u>11</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 20,742.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. | | medical | | | | |
| Southwest Laboratory Physicians Dept 77-9288 Chicago, IL 60678 | J | | | | | 178.00 |
| Account No. | | payday loan | | | | |
| Speedy Cash P.O. Box #780408 Wichita, KS 67278 | J | | | | | 785.00 |
| Account No. | | collection | | | | |
| Stellar Recovery 1327 Hwy 2 W, Suite 100 Kalispell, MT 59901 | J | | | | | 930.00 |
| Account No. | | collection - Citibank | | | | |
| Sunrise Credit Services 260 Airport Plaza PO Box 9168 Farmingdale, NY 11735 | J | | | | | 133.00 |
| Account No. | | phone service | | | | |
| T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015 | J | | | | | 750.00 |
| Sheet no. <u>12</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 2,776.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|------------------|
| | | | | | | |
| Account No. | | collection - TIVO | | | | |
| Transworld Systems 25 Northwest Point Blvd. Suite 750 Elk Grove Village, IL 60007 | J | | | | | 12.00 |
| Account No. | | phone service | | | | |
| US Cellular PO Box 7835 Madison, WI 53707 | J | | | | | 172.00 |
| Account No. | | phone service | | | | |
| Verizon Wireless Bankruptcy Dept. PO Box 5029 Wallingford, CT 06492 | J | | | | | 426.00 |
| Account No. | | | | | | |
| Account No. | | | | | | |
| Sheet no. <u>13</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 610.00 |
| | | Total (Report on Summary of Schedules) | | | | 96,796.00 |

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

0

continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

In re **Jesse B Stringer,
Yvette C Stringer**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

Fill in this information to identify your case:

| | |
|---|--------------------------------------|
| Debtor 1 | <u>Jesse B Stringer</u> |
| Debtor 2 (Spouse, if filing) | <u>Yvette C Stringer</u> |
| United States Bankruptcy Court for the: | <u>NORTHERN DISTRICT OF ILLINOIS</u> |
| Case number (If known) | _____ |

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

| | Debtor 1 | Debtor 2 or non-filing spouse |
|--------------------|---|---|
| Employment status | <input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed | <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed |
| Occupation | <u>Retired</u> | <u>Phlebotomist</u> |
| Employer's name | <u>Roseland Community Hospital</u> | |
| Employer's address | <u>45 W. 111th Street Chicago, IL 60628</u> | |

How long employed there? _____ 9 months _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|--------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. \$ <u>0.00</u> | \$ <u>2,423.63</u> |
| 3. Estimate and list monthly overtime pay. | 3. +\$ <u>0.00</u> | +\$ <u>0.00</u> |
| 4. Calculate gross income. Add line 2 + line 3. | 4. \$ <u>0.00</u> | \$ <u>2,423.63</u> |

Debtor 1 **Jesse B Stringer**
 Debtor 2 **Yvette C Stringer**

Case number (if known)

| | For Debtor 1 | For Debtor 2 or non-filing spouse | |
|--|---|--|---------------|
| Copy line 4 here | 4. \$ 0.00 | \$ 2,423.63 | |
| 5. List all payroll deductions: | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$ 0.00 | \$ 370.52 | |
| 5b. Mandatory contributions for retirement plans | 5b. \$ 0.00 | \$ 96.42 | |
| 5c. Voluntary contributions for retirement plans | 5c. \$ 0.00 | \$ 0.00 | |
| 5d. Required repayments of retirement fund loans | 5d. \$ 0.00 | \$ 0.00 | |
| 5e. Insurance | 5e. \$ 0.00 | \$ 98.04 | |
| 5f. Domestic support obligations | 5f. \$ 0.00 | \$ 0.00 | |
| 5g. Union dues | 5g. \$ 0.00 | \$ 0.00 | |
| 5h. Other deductions. Specify: _____ | 5h.+ \$ 0.00 | + \$ 0.00 | |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. \$ 0.00 | \$ 564.98 | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. \$ 0.00 | \$ 1,858.65 | |
| 8. List all other income regularly received: | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. \$ 0.00 | \$ 0.00 | |
| 8b. Interest and dividends | 8b. \$ 0.00 | \$ 0.00 | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. \$ 0.00 | \$ 0.00 | |
| 8d. Unemployment compensation | 8d. \$ 0.00 | \$ 0.00 | |
| 8e. Social Security | 8e. \$ 1,883.00 | \$ 0.00 | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____ | 8f. \$ 0.00 | \$ 0.00 | |
| 8g. Pension or retirement income | 8g. \$ 1,141.52 | \$ 0.00 | |
| 8h. Other monthly income. Specify: _____ | 8h.+ \$ 0.00 | + \$ 0.00 | |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. \$ 3,024.52 | \$ 0.00 | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ 3,024.52 | + \$ 1,858.65 | = \$ 4,883.17 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____ | 11. +\$ 0.00 | | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies | 12. \$ 4,883.17 | | |
| 13. Do you expect an increase or decrease within the year after you file this form? | <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____ | | |

Fill in this information to identify your case:

| | |
|---|--------------------------------------|
| Debtor 1 | <u>Jesse B Stringer</u> |
| Debtor 2 | <u>Yvette C Stringer</u> |
| (Spouse, if filing) | |
| United States Bankruptcy Court for the: | <u>NORTHERN DISTRICT OF ILLINOIS</u> |
| Case number (If known) | |

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date: _____

 MM / DD / YYYY

 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know
the value of such assistance and have included it on Schedule I: Your Income
(Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 882.16

Your expenses

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

| | |
|--------|---------------|
| 4a. \$ | <u>0.00</u> |
| 4b. \$ | <u>0.00</u> |
| 4c. \$ | <u>250.00</u> |
| 4d. \$ | <u>0.00</u> |
| 5. \$ | <u>0.00</u> |

Debtor 1 **Jesse B Stringer**
 Debtor 2 **Yvette C Stringer**

Case number (if known) _____

| | | |
|--|--|----------------------|
| 6. Utilities: | 6a. Electricity, heat, natural gas | 6a. \$ <u>350.00</u> |
| | 6b. Water, sewer, garbage collection | 6b. \$ <u>84.00</u> |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ <u>300.00</u> |
| | 6d. Other. Specify: _____ | 6d. \$ <u>0.00</u> |
| 7. Food and housekeeping supplies | 7. \$ <u>650.00</u> | |
| 8. Childcare and children's education costs | 8. \$ <u>0.00</u> | |
| 9. Clothing, laundry, and dry cleaning | 9. \$ <u>150.00</u> | |
| 10. Personal care products and services | 10. \$ <u>200.00</u> | |
| 11. Medical and dental expenses | 11. \$ <u>150.00</u> | |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. \$ <u>350.00</u> | |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ <u>150.00</u> | |
| 14. Charitable contributions and religious donations | 14. \$ <u>0.00</u> | |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. \$ <u>108.00</u> | |
| 15b. Health insurance | 15b. \$ <u>0.00</u> | |
| 15c. Vehicle insurance | 15c. \$ <u>105.00</u> | |
| 15d. Other insurance. Specify: _____ | 15d. \$ <u>0.00</u> | |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>past-due Federal Income Tax (projected)</u> | 16. \$ <u>350.00</u> | |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a. \$ <u>0.00</u> | |
| 17b. Car payments for Vehicle 2 | 17b. \$ <u>0.00</u> | |
| 17c. Other. Specify: <u>payments to IL Tollway toward past-due balance (projected)</u> | 17c. \$ <u>300.00</u> | |
| 17d. Other. Specify: _____ | 17d. \$ <u>0.00</u> | |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). | 18. \$ <u>0.00</u> | |
| 19. Other payments you make to support others who do not live with you. Specify: _____ | \$ <u>0.00</u> | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| 20a. Mortgages on other property | 20a. \$ <u>0.00</u> | |
| 20b. Real estate taxes | 20b. \$ <u>0.00</u> | |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ <u>0.00</u> | |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ <u>0.00</u> | |
| 20e. Homeowner's association or condominium dues | 20e. \$ <u>0.00</u> | |
| 21. Other: Specify: _____ | 21. +\$ <u>0.00</u> | |
| 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. | 22. \$ <u>4,379.16</u> | |
| 23. Calculate your monthly net income. | | |
| 23a. Copy line 12 (your <i>combined monthly income</i>) from Schedule I. | 23a. \$ <u>4,883.17</u> | |
| 23b. Copy your monthly expenses from line 22 above. | 23b. -\$ <u>4,379.16</u> | |
| 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. \$ <u>504.01</u> | |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | | |
| <input checked="" type="checkbox"/> No. | | |
| <input type="checkbox"/> Yes. | | |
| Explain: _____ | | |

**United States Bankruptcy Court
Northern District of Illinois**

In re Jesse B Stringer
Yvette C Stringer

In re

Debtor(s)

Case No.

Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 30 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date April 27, 2015

Signature /s/ Jesse B Stringer
Jesse B Stringer
Debtor

Date April 27, 2015

Signature /s/ Yvette C Stringer
Yvette C Stringer
Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re **Jesse B Stringer**
Yvette C Stringer

Case No.
Chapter

Debtor(s)

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|--------------------|---------------------------------|
| \$10,782.00 | Employment - Wife - 2015 |
| \$12,751.00 | Employment- Wife - 2014 |

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-------------------|---------------------------------|
| \$4,864.00 | Pension - Husband - 2015 |

B7 (Official Form 7) (04/13)

2

| AMOUNT | SOURCE |
|-------------|---|
| \$14,831.00 | Pension - Husband - 2014 |
| \$14,592.00 | Pension - Husband - 2013 |
| \$7,532.00 | Social Security - Husband - 2015 |
| \$22,224.00 | Social Security - Husband - 2014 |
| \$21,888.00 | Social Security - Husband - 2013 |

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|---------------------------------|----------------------|-------------|-----------------------|
|---------------------------------|----------------------|-------------|-----------------------|

None

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS/ TRANSFERS | AMOUNT PAID OR VALUE OF TRANSFERS | AMOUNT STILL OWING |
|------------------------------|------------------------------------|--|-----------------------|
|------------------------------|------------------------------------|--|-----------------------|

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR | DATE OF PAYMENT | AMOUNT PAID | AMOUNT STILL OWING |
|--|-----------------|-------------|-----------------------|
|--|-----------------|-------------|-----------------------|

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT AND CASE NUMBER | NATURE OF PROCEEDING | COURT OR AGENCY AND LOCATION | STATUS OR DISPOSITION |
|------------------------------------|-------------------------|---------------------------------|--------------------------|
|------------------------------------|-------------------------|---------------------------------|--------------------------|

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED | DATE OF SEIZURE | DESCRIPTION AND VALUE OF PROPERTY |
|---|-----------------|--------------------------------------|
|---|-----------------|--------------------------------------|

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR OR SELLER | DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN | DESCRIPTION AND VALUE OF PROPERTY |
|--|--|-----------------------------------|
|--|--|-----------------------------------|

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|------------------------------|--------------------|-----------------------------------|
|------------------------------|--------------------|-----------------------------------|

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CUSTODIAN | NAME AND LOCATION OF COURT CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|-------------------------------|--|---------------|-----------------------------------|
|-------------------------------|--|---------------|-----------------------------------|

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|--|--------------------------------|--------------|-------------------------------|
|--|--------------------------------|--------------|-------------------------------|

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|---|---|----------------------|
| 2005 Chevrolet Avalanche; value: \$6,000 | vehicle involved in hit and run accident; damage to fender, hood, bumper, headlights, turn signals; frame; repairs have been made except to electrical system. | January, 2015 |

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|---|---|--|
| Law Office of Peter Berk 900 N Franklin Street Suite 505 Chicago, IL 60610 | 4/24/2015 | \$865.00 |

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED |
|---|---------------------------|---|
| None <input checked="" type="checkbox"/> b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary. | | |
| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|---------------------------------|--|---------------------------------------|
|---------------------------------|--|---------------------------------------|

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|---|---|----------------------------|--|
|---|---|----------------------------|--|

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|
|------------------------------|----------------|------------------|

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|
|---------------------------|-----------------------------------|----------------------|

15. Prior address of debtor

None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

| ADDRESS | NAME USED | DATES OF OCCUPANCY |
|---------|-----------|--------------------|
|---------|-----------|--------------------|

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

| NAME |
|------|
|------|

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

| NAME AND ADDRESS OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|---------------------------------------|---------------|-----------------------|
|---------------------------------------|---------------|-----------------------|

18 . Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

| | LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. NAME (ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND ENDING DATES |
|--|--|---------|--------------------|-------------------------------|
|--|--|---------|--------------------|-------------------------------|

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

| | |
|------|---------|
| NAME | ADDRESS |
|------|---------|

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 27, 2015

Signature /s/ Jesse B Stringer
Jesse B Stringer
Debtor

Date April 27, 2015

Signature /s/ Yvette C Stringer
Yvette C Stringer
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court
Northern District of Illinois

In re **Jesse B Stringer**
Yvette C Stringer

Case No.
Chapter

Debtor(s)

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

| | | | |
|---|--------------------------------------|--|---|
| Property No. 1 | Creditor's Name: Chase Mtg | | Describe Property Securing Debt: 324 W 101st Place, Chicago, IL 60628 (single family home); value is per Zillow.Com 4/24/15 |
| Property will be (check one): <input type="checkbox"/> Surrendered | | <input checked="" type="checkbox"/> Retained | |
| If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain avoid lien using 11 U.S.C. § 522(f) (for example, avoid lien using 11 U.S.C. § 522(f)). | | | |
| Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt | | <input type="checkbox"/> Not claimed as exempt | |

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

| | | | | |
|----------------|---------------------------------|--|---------------------------|--|
| Property No. 1 | Lessor's Name: -NONE- | | Describe Leased Property: | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO |
|----------------|---------------------------------|--|---------------------------|--|

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date April 27, 2015

Signature /s/ Jesse B Stringer
Jesse B Stringer
Debtor

Date April 27, 2015

Signature /s/ Yvette C Stringer
Yvette C Stringer
Joint Debtor

United States Bankruptcy Court
Northern District of Illinois

In re **Jesse B Stringer**
Yvette C Stringer

Case No.
Chapter

Debtor(s)

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|---|--------------------|
| For legal services, I have agreed to accept | \$ 1,687.50 |
| Prior to the filing of this statement I have received | \$ 865.00 |
| Balance Due | \$ 822.50 |

2. \$ **335.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor Other (specify):

4. The source of compensation to be paid to me is:

Debtor Other (specify):

5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in all adversary proceedings, judicial lien avoidances, relief from stay actions, audits, reaffirmation hearings, Motions to Dismiss, Rule 2004 examinations, and all other contested matters.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: April 27, 2015

/s/ Peter L. Berk
Peter L. Berk
Law Office of Peter Berk
900 N Franklin Street
Suite 505
Chicago, IL 60610
(312) 758-1121 Fax: (312) 212-5963
plberk@berklegal.com

LAW OFFICE OF PETER L BERK

ATTORNEYS AT LAW | 900 N FRANKLIN STREET | SUITE 505 | CHICAGO IL | (312) 758-1121

CHAPTER 7 BANKRUPTCY FEE AGREEMENT

THIS CHAPTER 7 BANKRUPTCY FEE AGREEMENT is entered into as of the date of Client's signature below, by and between: Jesse and Yvette Stringer (referred to as "Client" whether one or more) and Law Office of Peter L. Berk, (Attorney), to perform legal services as described below.

At no charge, Client has consulted with Attorney to review Client's bankruptcy options. Client acknowledges that the consultation date is the first date upon which the Attorney has first offered to provide any bankruptcy assistance or bankruptcy services to Client. In this consultation, Attorney has provided information and general advice on obtaining relief from debts, including relief from debts by filing either a Chapter 7, Chapter 11, or Chapter 13 bankruptcy.

Attorney has explained to Client that documentation and information is required before Attorney can advise Client of Client's legal options. Client has been advised that Client must sign a written contract for bankruptcy assistance services within five (5) business days of this Initial Consultation (this contract).

Client(s) acknowledges receiving a document production checklist, information on a pre-filing credit counseling course and post-filing financial management course, and Disclosures required by 11 U.S.C. 527(a) and (b).

Client confirms that Attorney has not advised the client to incur any indebtedness in anticipation of the bankruptcy case, except for payment of the Attorney's legal services and necessary Court costs and expenses.

No Attorney/Client Relationship is created unless Client signs this Agreement and makes a deposit toward the Fees required for the case. Otherwise, the Attorney does not represent Client and shall not take any action on Client's behalf.

1. EFFECT OF THIS AGREEMENT. By signing this Fee Agreement, the Client requests bankruptcy representation, and hereby employs the Attorney to file the Chapter 7 Bankruptcy Petition and represent Client in the case. Attorney will not file the Chapter 7 Bankruptcy Petition until such time as Client(s) have produced ALL of the necessary documents requested by the Attorney, and until the fees are paid as stated in Paragraph 2 below.

2. FLAT FEE: For legal services provided herein, the Attorney has agreed to accept the sum of \$1,125.00 for legal fees, \$335 for Court costs, \$562.50 for Motion to Avoid Judgment Lien, for a grand total of \$2,022.50. Client shall make a down payment of \$1,200.00 and then shall make payments of \$274 on May 8, 2015, \$274 on June 5, 2015, and \$274 on July 3rd, 2015.

THE ATTORNEY FEES INCLUDE:

- (a) Analysis of the Client(s) financial situation, and rendering advice to the Client(s) in determining whether to file a Petition in Bankruptcy;
- (b) Preparation and filing of any Petition, Schedules, Statement of Affairs, and other documentation which may be required in a Chapter 7 Bankruptcy;
- (c) Representation of the Client(s) at the Meeting of Creditors pursuant to 11 U.S.C. §341, and any adjourned hearings thereof.
- (d) Communication with client concerning questions or any other matters of concern to the client (all phone calls and emails will be returned promptly, as in the same day if possible). The Attorney encourages Clients to ask questions. There is no such thing as a "dumb" question. If Client does not understand anything having to do with the Chapter 7 case, the Client should ask.
- (e) Completing reaffirmation agreements, when sent to the Attorney by secured creditors, for secured debts.

THE ATTORNEY FEES DO NOT INCLUDE:

The vast majority of the Attorney's Chapter 7 cases are completed, from start to finish, without any additional fees (other than the fee specified in Paragraph 2 above). However, the above disclosed FEE does NOT INCLUDE representation by the Attorney in the following:

- (a) Adversary Proceeding (lawsuit) or other contested matters (representation will be hourly at the attorney's normal hourly rate of \$300.00; attorney is not required to represent Client in Adversary proceedings, and Client is not obligated to retain the Attorney for adversary proceedings; advance retainer will be required)
- (b) reaffirmation hearings (required when the Client's budget does not show that the Client can afford the payment for Client's car loan, or other secured debt, and the Client desires to keep the financed vehicle, or other collateral). The Attorney shall charge \$225.00 for his appearance at any reaffirmation hearing.
- (c) Rule 2004 Examinations, Motions to Dismiss, and audits. Representation will be at the Attorney's standard hourly rate of \$300, and advance retainer will be required.
- (d) Appeals. Representation will be at the Attorney's standard hourly rate of \$300, and an advance retainer will be required. Attorney's representation is not mandated or required.
- (e) Judgment lien avoidance. Representation shall be at the Attorney's standard hourly rate of \$300, or a flat fee selected by the Attorney.

3. **REAFFIRMATION AGREEMENTS:** Reaffirmation agreements are commonly requested by auto finance companies and other lenders who have received collateral from the client in exchange for extending credit to the client. These agreements exclude debts from the Chapter 7 discharge. In exchange, the finance company/lender must allow the client to retain the vehicle or other collateral, provided the client makes regular monthly payments according to the original loan contract. Reaffirmation agreements will only be prepared by the Attorney when the forms are received from the lender. Often, the agreements will be signed at the trustee meeting that clients must attend with the Attorney. Reaffirmation agreements are not normally required by mortgage companies. The Attorney will only prepare a reaffirmation agreement for a mortgage if the form for the agreement is received by the Attorney from the mortgage company, and only if the Attorney determines that entering into such an agreement is advisable for the client. If the reaffirmation form is not received from the lender, the Attorney is not responsible for completing the reaffirmation.

4. **CLIENT RESPONSIBILITIES:**

(a) The Client must attend at least one meeting with the bankruptcy trustee. Client will have notice of the meeting at least 21 days in advance. There will be a \$200.00 charge should the client miss the meeting of creditors, without contacting the attorney at least 24 hours in advance of the meeting.

(b) The Client is required to complete a course in financial management within 45 days following the meeting of creditors. This course is in addition to the pre-filing credit counseling course. If this course is not completed, and the certificate of completion not sent to the Attorney within this time period, the Client's case will be closed by the Court without a discharge. A filing fee of \$260 and an attorney's fee of \$240, for a total of \$500 is required if the Attorney must file a motion to reopen a Chapter 7 case. The fees must be paid in advance of the filing of said Motion.

(c) If, after 2 weeks from the filing date, the Client is still receiving collection action from creditors, the Client should inform the Attorney immediately. Also, if any creditor is not complying with the discharge order when it is entered, the Client should notify the Attorney immediately.

(d) Client agrees to promptly respond to communications from the Attorney and to send any additional documents as may be requested by the Attorney.

(e) Client agrees to accurately disclose all assets, all debts, and all sources of income and expenses to the attorney. Client further acknowledges that the bankruptcy trustee and creditors may investigate Client's financial affairs and Client agrees to cooperate and provide any necessary financial records to the extent required by the Bankruptcy Code.

5. **PERSONNEL.** Client acknowledges that the Attorney may engage associate attorneys to handle matters in Client's bankruptcy case, including but not limited to representation at the meeting of creditors.

6. **DEBTS THAT ARE NOT DISCHARGEABLE.** There are some categories of debts that are not dischargeable in Chapter 7. The most common types of debts that are not dischargeable are student loans, parking tickets and moving violations, and some tax debts. The Attorney will make every effort to identify any debts that are not dischargeable, in advance of filing the Chapter 7 case, and to discuss the debts with Client.

7. **DISCHARGE ORDER.** The goal of every Chapter 7 case is to obtain the discharge order for the Client. This is the order that formally releases the Client from liability for dischargeable debts. The earliest the order can be obtained is 60 days after the meeting with the bankruptcy trustee. The Attorney does not guarantee success in obtaining the discharge order, but will make every effort to do so. Once the discharge order is issued, it will be sent to the Client in the mail.

8. **CREDITORS.** The Attorney will, with the Client's consent, obtain a credit report prior to the filing of the bankruptcy case. The Credit report will be provided to Client. Client agrees to review the report and before the case is filed, provide the Attorney with information as to any additional creditors not listed on the report. If, after the case is filed, the Client notifies the attorney of a creditor not listed in the bankruptcy, the Client may have the option to file an amendment in order to add creditors to the bankruptcy. The amendment fee will be \$40.00, plus a Court fee of \$35.00, for a total of \$75.00.

9. **TERMINATION/ END OF SERVICES.** Either party may terminate this contract at any time, by written notice, subject to the approval of the bankruptcy court, if necessary. Otherwise, the term of the agreement shall end at such time as the Client's bankruptcy case is closed or dismissed (the "End Date"). Client is responsible to pay for the Attorney's Services up to the End Date or the date the Attorney's services are terminated. If the Client terminates the agreement prior to the End Date, Attorney may charge the Client for the time spent on the file at his normal hourly rate, and will provide Client will an

itemized bill to the tenth of the hour. If the total charge is less than the sum paid to the Attorney by the Client, the Client will receive a refund.

Client acknowledges having received a copy of this Agreement. Client has had ample opportunity to review the agreement, and by signing below, elects to retain the attorney for the Chapter 7 case.

IN WITNESS WHEREOF, the parties have executed this Chapter 7 Bankruptcy Fee Agreement:

JESSE B STRINGER

Signature: /s/ Jesse B Stringer

Date: 4/24/2015

YVETTE STRINGER

Signature: /s/ Yvette Stringer

Date: 4/24/2015

LAW OFFICE OF PETER L BERK

Signature: /s/ Peter L Berk

Date: 4/24/2015

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court
Northern District of Illinois**

In re Jesse B Stringer Yvette C Stringer _____ Case No. _____
Debtor(s) Chapter 7 _____

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Jesse B Stringer
Yvette C Stringer _____
Printed Name(s) of Debtor(s)

Case No. (if known) _____

| | |
|--|-----------------------|
| <input checked="" type="checkbox"/> <u>/s/ Jesse B Stringer</u> | April 27, 2015 |
| Signature of Debtor | Date |
| <input checked="" type="checkbox"/> <u>/s/ Yvette C Stringer</u> | April 27, 2015 |
| Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
Northern District of Illinois**

In re **Jesse B Stringer
Yvette C Stringer**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **79**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **April 27, 2015**

/s/ Jesse B Stringer

Jesse B Stringer

Signature of Debtor

Date: **April 27, 2015**

/s/ Yvette C Stringer

Yvette C Stringer

Signature of Debtor

AAM Inc.
330 Georgetown Sq.
Wood Dale, IL 60191

Advocate Medical Group
701 Lee Street
Des Plaines, IL 60016

Advocate Trinity Hospital
2320 E 93rd Street
Chicago, IL 60617

AFNI
404 Brock Drive
PO Box 3517
Bloomington, IL 61702

AIS Services LLC
50 California St. Suite 1500
San Francisco, CA 94111

America's Financial Choice
1415 W 22nd St.
Oak Brook, IL 60523

American Infosource
PO Box 248848
Oklahoma City, OK 73124

American Infosource
Mailstation N387
2230 E Imperial HWY
El Segundo, CA 90245

Americash Loans
1513 E 53rd St
Chicago, IL 60615

AMO Recoveries
6737 W Washington St S-3
West Allis, WI 53214

Approved Credit Solutions
704 S State Road
135 Ste D328
Greenwood, IN 46143

Armor Systems Corp.
1700 Ziefer Dr. Suite 1
Zion, IL 60099

Arnoldharris
111 West Jackson B
Chicago, IL 60604

Associated St. James Radiologists
PO Box 3463
Springfield, IL 62708

AT&T Mobility
ONE AT&T WAY, SUITE 3A104
Bedminster, NJ 07921

Brinks Home Security
PO Box 70834
Charlotte, NC 28272

Bud's Ambulance Svcs
1234 E Sibley Blvd.
Dolton, IL 60419

Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

CB USA
PO Box 663
Hammond, IN 46325

Cerastes, LLC
C/O Weinstein Pinson Riley
2001 Western Ave. Suite 400
Seattle, WA 98121

Chandra Diagnostic Cardiology
4250 N Marine Dr. # 236
Chicago, IL 60613

Chase Bank
800 Brookedge Blvd.
Westerville, OH 43081

Chase Mtg
Po Box 24696
Columbus, OH 43224

Chicago Imaging
PO Box 3183
Carol Stream, IL 60132

Comcast
1255 W North Avenue
Chicago, IL 60622

Convergent Outsourcing, Inc.
10750 Hammerly Blvd.
Suite 200
Houston, TX 77043

Credit One Bank
Po Box 98873
Las Vegas, NV 89193

Direct TV
PO Box 6550
Greenwood Village, CO 80155

Diversified Consultants
PO Box 1391
Southgate, MI 48195

Dr. Vipul Patel
2075 Indianapolis Blvd.
Whiting, IN 46394

Emergency Care Physician Servs
PO Box 88640
Chicago, IL 60680

Enhanced Recovery Corporation
8014 Bayberry Road
Jacksonville, FL 32256-7412

Firstsource Advantage, LLC
205 Bryant Woods South
Buffalo, NY 14228

Franklin Collection Svc
2978 W Jackson St.
Tupelo, MS 38801

Galaxy Intl Purchasing LLC
Attn Quantum 3 Group LLC
PO Box 788
Kirkland, WA 98083

Gateway Financial Solutions
PO Box 3257
Saginaw, MI 48605

Gleason & Gleason LLC
77 W Washington Suite 1218
Chicago, IL 60602

Global Payments, Inc.
PO Box 661158
Chicago, IL 60666

Harris & Harris
111 W Jackson Ste 400
Chicago, IL 60604

IC System
Attn: Bankruptcy
444 Highway 96 East; Po Box 64378
St. Paul, MN 55164

ICS Collection Service
PO Box 646
Oak Lawn, IL 60454-0646

IL Dept Employment Security
Benefit Payment Control Division
PO Box 4385
Chicago, IL 60680

Illinois Bell Telephone Co.
C/o AT&T Services, Inc.
One AT&T Way, Room 3A104
Bedminster, NJ 07921

Illinois Eye Institute
3241 South Michigan Ave.
Chicago, IL 60616

Integrity Advance, LLC
300 Creek View Road
Suite 102
Newark, DE 19711

Internal Revenue Service
Bankruptcy Notice Address
PO Box 7346
Philadelphia, PA 19101-7346

James M Philbrick
PO Box 351
Mundelein, IL 60060

Leading Edge Recovery Solutions
5440 N Cumberland Ave Suite 300
Chicago, IL 60656

LVNV Funding LLC
PO Box 10584
Greenville, SC 29063

Medical Business Bureau
111 W Jackson Suite 400
Chicago, IL 60604

Medical Business Bureau
1175 Devin Drive
Suite 171
Muskegon, MI 49441

Medical Recovery Specialists
2250 E Devon Avenue
Suite 352
Des Plaines, IL 60018-4519

Merchants Credit Guide
223 W Jackson Blvd.
Suite 900
Chicago, IL 60606-6908

Metrosouth Medical Center
12935 S Gregory Street
Blue Island, IL 60406

Michael Torchalski, Esq.
820 E Terra Cotta Ave. Suite 207
Crystal Lake, IL 60014

Midwest Diagnostic Pathology
75 Remittance Drive Ste 3070
Chicago, IL 60675-3070

Midwest Emergency Assoc.
PO Box 5990
Carol Stream, IL 60197

Municipal Collection Services
PO Box 666
Lansing, IL 60438

Municipal Collection Svcs
3348 Ridge Road
Lansing, IL 60438

NCO Financial
Attn: Bankruptcy
Lake Huntington, NY 12752

Ndc Ck Svc
Po Box 661158
Chicago, IL 60666

North Shore Agency
270 Spagnoli Road
Melville, NY 11747

Partners Financial Svcs
PO Box 728
Fenton, MO 63026

Premier Bankcard/Charter
PO Box 2208
Vacaville, CA 95696

Prestige Financial
PO Box 26707
Salt Lake City, UT 84126

Resurgent Capital Services
PO Box 10587
Greenville, SC 29603

Roseland Community Hospital
45 W. 111th Street
Chicago, IL 60628

Santander Consumer USA
PO Box 961245
Fort Worth, TX 76161

Southwest Laboratory Physicians
Dept 77-9288
Chicago, IL 60678

Speedy Cash
P.O. Box #780408
Wichita, KS 67278

Speedy Cash
4648 S Cicero Ave.
Chicago, IL 60638

Sprint
PO Box 4191
Carol Stream, IL 60197-4191

Stellar Recovery
1327 Hwy 2 W, Suite 100
Kalispell, MT 59901

Sunrise Credit Services
260 Airport Plaza
PO Box 9168
Farmingdale, NY 11735

T-Mobile
Bankruptcy Team
PO Box 53410
Bellevue, WA 98015

T-Mobile
PO Box 742596
Cincinnati, OH 45274-2596

Transworld Systems
25 Northwest Point Blvd.
Suite 750
Elk Grove Village, IL 60007

US Cellular
PO Box 7835
Madison, WI 53707

Verizon Wireless
Bankruptcy Dept.
PO Box 5029
Wallingford, CT 06492